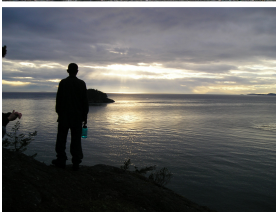




# Environmental Education / Outdoor Recreation Signature Programs

Summer 2009





Dear Teen Development Leaders,

Happy spring! I hope that everybody is looking forward to summer and are in the midst of planning some fun teen events. Summer is a great time to get outside and do some trips to our various urban parks as well as to natural areas close to the city. This summer the Environmental Education / Outdoor Recreation Signature Program will be offering two different outdoor activities for you to take advantage of. All of these trips are provided free of charge through various community partnerships and grant sources. Instructions on how to sign up for trips and trip expectations are listed below:

*Trip Sign Up Process:* Trips will be filled on a first come first serve basis via e-mail. If you see an activity you'd like to participate in, e-mail Matt Axling with the top three dates which you'd like to participate. Matt will get back to you to confirm dates and to discuss further logistics.

*Travel Planning Guidelines:* Each trip requires that Department trip and travel standards are met. Information regarding Emergency Response Plans, staffing ratios, medical certification etc. can all be found on the Department's Inweb at <http://inweb/parks/travel/>

*Follow Through:* Given that each of these programs are supported by various grant sources, it is crucial that we meet certain benchmarks with respect to number of students served and number of trips completed. If you sign up for a trip, please do your best to follow through with this commitment! If you are having problems filling your trip, please call Matt in advance so that we can arrive at a solution together!

Whether you are planning your own trip or taking advantage of one of the pre-planned trips listed above, please feel free to use me as a resource! You are always welcome to call anytime and discuss ideas, plans or future events. I look forward to hearing from you!

Matt Axling  
Outdoor Opportunities Program Coordinator  
206-615-1899 (office)  
206-390-1018 (cell)



## Summer 2009 Mountain Biking Program

**WHAT:** Mountain biking is a fun activity that involves riding a bicycle on dirt hiking trails. For this partnership, we will be exploring the trails at St. Edwards State Park. Students will ride bikes along trails all the while tackling hills, roots, rocks and smooth hiking trails. It is a fun way to exercise, learn about the environment and try out a challenging new activity!



**WHEN:**

Friday, July 24 <sup>th</sup> 2009	3:00 – 5:30 p.m.
Friday, August 7 <sup>th</sup> 2009	3:00 – 5:30 p.m.
Friday, August 14 <sup>th</sup> 2009	3:00 – 5:30 p.m.
Friday, August 21 <sup>st</sup> 2009	3:00 – 5:30 p.m.
Saturday, September 12 <sup>th</sup> 2009	9:00 a.m. – 4 p.m.

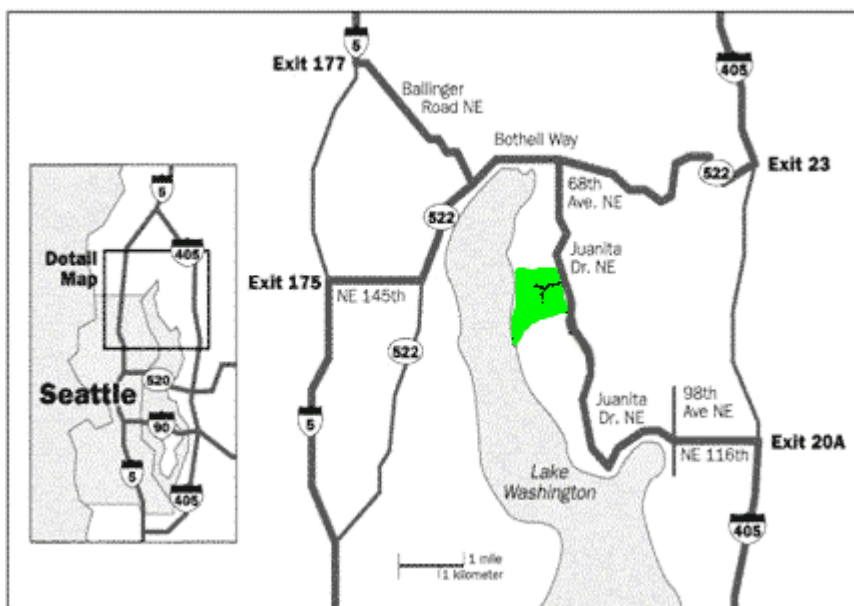
(Sept. 12<sup>th</sup> event located at South Sea-Tac park in Burien)

**WHERE:** St. Edward State Park is located in Kenmore at the north end of Lake Washington. From downtown Seattle, you should plan at least 40 minutes for travel time

*Address:* 14445 Juanita Drive NE Kenmore, WA 98028

*Directions from I-5 Northbound:*

- Take EXIT 175 (NE 145th) and turn RIGHT at the end of the exit ramp onto NE 145th.
- Follow NE 145th to Hwy 522/Bothell Way. Turn LEFT on Hwy 522/Bothell Way to 68th Avenue NE in Kenmore.
- Turn RIGHT on 68th Ave NE, which becomes Juanita Drive NE, and follow it south to sign on the right indicating Saint Edward State Park and Bastyr University (NE 145th)
- Follow the road down the hill. At the fork in the road, bear to the right. Continue to the bottom of the hill. Look for a green Seattle Parks van in the furthest parking lot to the right.





**WHAT TO BRING:**

TDL Packing List: -Parks Paperwork (form E-13) for each participant  
-Trips for Kids paperwork signed by parent or guardian for each participant on the ride.  
-Emergency Response Plan  
-Food to eat after the ride (Trips for Kids will bring water bottles and energy bars to snack on).

Student Packing List: -Closed toe shoes (no sandals)  
-Clothing that is appropriate to be outside and active!

What Trips for Kids will Bring: -Bikes  
-Helmets  
-Water and energy bars  
-Trip Leaders

**ASSOCIATED PAPERWORK:**

- Each student must arrive at the mountain biking trip with a signed Trips for Kids waiver in hand. Students who arrive on the day of the ride without signed paperwork will not be allowed to ride. The waiver is included below and can also be found at [www.tripsforkidsseattle.org](http://www.tripsforkidsseattle.org)
- Please refer to the Travel Planning Guideline website's Day Bicycle Trip logistics sheet for pertinent information on Emergency Response Plans, required paperwork, etc. The new Travel Planning Guidelines website can be found on the inweb at <http://inweb/parks/travel/>
- The O<sub>2</sub> program will complete an ERP for this trip prior to the summer. Feel free to make any necessary modifications to this ERP to reflect your center.

**HOW TO SIGN UP:**

- Email Matt Axling at [matt.axling@seattle.gov](mailto:matt.axling@seattle.gov)

**QUESTIONS ON THE DAY OF THE EVENT?**

- Call Mara Bernard at 206-510-8191



### **Trips for Kids Seattle**

THIS FORM MUST BE READ, COMPLETED IN FULL, SIGNED AND GIVEN TO THE TFK LEADER BEFORE THE PARTICIPANT MAY GO ON THE OUTING.

OUTINGS:

#### **EXPRESS ASSUMPTION OF RISK, RELEASE, INDEMNIFICATION AND COVENANT NOT TO SUE AGREEMENT**

In consideration for the services of Trips for Kids Seattle its outing leaders, officers, agents, and volunteers (collectively referred to herein as "TFK"), I, on behalf of myself and/or as the parent or guardian of the minor child participating in the TFK activity, and our heirs, agree as follows:

I understand and am aware that hiking, backpacking, river rafting, canoeing, mountain biking, swimming, and related activities including, among others, use of TFK equipment such as camp stoves, campfires, knives, tents, backpacks, rafts, canoes, and bicycles (referred to herein as "Activity"), and transportation to and from such Activity, are HAZARDOUS ACTIVITIES involving INHERENT AND OTHER RISKS of injury to any and all parts of the body. I further understand that injuries in the Activity are a COMMON AND ORDINARY OCCURRENCE, and I have made a voluntary choice for myself and/or the minor child listed below to ACCEPT AND ASSUME ALL RISKS OF INJURY OR DEATH that might be associated with or result from this Activity.

To the fullest extent allowed by law, I agree to RELEASE FROM LIABILITY, and to INDEMNIFY AND HOLD HARMLESS TFK from any and all liability on account of, or in any way resulting from, personal injuries, death or property damage, even if caused by NEGLIGENCE, in any way connected with this Activity. I further AGREE NOT TO MAKE A CLAIM OR SUE FOR INJURIES OR DAMAGES RELATING TO THIS ACTIVITY, even if caused by NEGLIGENCE. I understand and agree that this Agreement is intended to be as broad and inclusive as is permitted by law, and if any portion is held invalid, the balance shall continue in full legal force and effect. I agree that no oral representations, statements or inducements apart from this Agreement have been made.

#### **AUTHORIZATION FOR FIRST AID AND MEDICAL TREATMENT**

I recognize that medical or dental care may be necessary for myself and/or my minor child. I AUTHORIZE TFK AND THE OUTING LEADER(S) TO RENDER FIRST AID OR EMERGENCY CARE, within the scope of the certification of the outing leader(s). In addition, I authorize TFK to call for medical or dental care for myself and/or my minor child if, in the opinion of TFK, medical or dental care is needed. I AGREE TO PAY FOR ALL EXPENSES AND COSTS ASSOCIATED WITH SUCH CARE AND RELATED TRANSPORTATION. In addition, I hereby authorize and consent for any x-ray examination, anesthetic, medical, dental or surgical diagnosis rendered under the general or special supervision of any member of the medical staff and/or emergency staff and/or dentist currently licensed by the state in which treatment is given and the staff of any acute general hospital holding a current license to operate a hospital from the State of California Department of Public Health or the equivalent agency in another state. It is understood that this authorization is given in advance of any specific diagnosis, treatment, or hospital care being required but is given to provide authority and power to render care which the physician in the exercise of his best judgment may deem advisable. It is understood, medical condition allowing, that effort shall be made to consult the undersigned prior to rendering the treatment to the patient, but that any of the above treatment will not be withheld if the undersigned is incapacitated or cannot be reached.

To accomplish our goals, Trips for Kids frequently sends press releases and photographs to the media (newspaper, radio, television and the internet) and uses photos in our own publications. It is the right of the individual whether or not to consent to the use of his/her photograph and/ or name for the above publicity purposes. I hereby authorize Trips for Kids to use any photos taken of me during Trips for Kids activities.

\_\_\_\_\_ yes \_\_\_\_\_ no

I HEREBY ACKNOWLEDGE THAT ALL THE INFORMATION I HAVE PROVIDED ON PAGE ONE AND PAGE TWO OF THIS AGREEMENT IS TRUE, CORRECT AND COMPLETE. I AGREE TO UPDATE PAGE 2 OF THIS AGREEMENT AS NECESSARY. I HEREBY ACKNOWLEDGE THAT I HAVE FULLY READ, UNDERSTOOD AND ACCEPTED EACH OF THE ABOVE PROVISIONS, AND VOLUNTARILY SIGNED THIS AGREEMENT.

\_\_\_\_\_  
[NAME OF PARTICIPANT]                      [ AGE]                      [NAME OF PARENT/GUARDIAN OF MINOR PARTICIPANT]

\_\_\_\_\_  
[SIGNATURE OF PARTICIPANT OR PARENT/GUARDIAN OF MINOR PARTICIPANT] Date: \_\_\_\_\_

**YOU MUST ALSO READ AND COMPLETE PAGE TWO OF THIS AGREEMENT**

Kids and Volunteer Form

**PARTICIPANT'S EMERGENCY MEDICAL INFORMATION**

This information may be used for more than one outing. You must inform the outing leader if any of this information changes from outing to outing.

1. Participant's Name \_\_\_\_\_

Parent's/Guardian's Name (of minor participant) \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Birthdate: \_\_\_\_\_ Date of most recent tetanus toxoid booster: \_\_\_\_\_

2. Allergies to drugs, foods, insect bites, etc.: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. List all medications for which the participant currently holds a prescription and indicate which ones the participant will be taking during outing(s): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. List all medical conditions of which the outing leader should be aware or which may affect the participant's ability to participate in activities (such as asthma, heart disease, diabetes or neuromuscular or skeletal impairment):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Family Physician: \_\_\_\_\_  
(Name) (Address) (Phone)

Insurance Company: \_\_\_\_\_ Policy Number: \_\_\_\_\_

List the persons we should call in case of an emergency. We will try to contact them in the order that they are listed below.

1.	Name	Relationship	Daytime Phone	Evening Phone
2.	Name	Relationship	Daytime Phone	Evening Phone
3.	Name	Relationship	Daytime Phone	Evening Phone

YOU MUST ALSO READ AND SIGN PAGE ONE OF THIS AGREEMENT



## **Community Center Outdoor Rock Climbing Program Summer 2009**

### **PROGRAM DESCRIPTION:**

This summer the O<sub>2</sub> program will be facilitating four community center outdoor rock climbing programs. Each rock climbing program can accommodate two community centers. Each rock climbing program will take place in the North Bend area at a climbing location called Exit 38. During this day, students will practice basic rock climbing techniques, learn how to tie knots and experience a true outdoor rock climbing environment.

O<sub>2</sub> will be asking each community center to limit youth enrollment to a total of 8 and to provide at least one community center adult supervisor. The O<sub>2</sub> program will organize, oversee and instruct the day trips. This oversight will include O<sub>2</sub> staff time and providing appropriate adult volunteers, an advance wilderness first aid certified staff, first aid supplies, climbing gear and instruction.

### **AVAILABLE PROGRAM DATES:**

- Program #1: July 23<sup>rd</sup>
- Program #2: July 30<sup>th</sup>
- Program #3: August 6<sup>th</sup>
- Program #4: August 27<sup>th</sup>

### **MEETING PLACE / TIMES:**

- Each climbing program will take place between 10 a.m. and 1 p.m.
- Exit 38 is located approximately 45 - 60 minutes east of Seattle on I-90.

### **DRIVING DIRECTIONS TO EXIT 38:**

- Take I - 90 East past North Bend.
- Approximately 5 miles east of North Bend get off the highway at Exit 38.
- Take a right off the exit.
- Continue approximately ½ mile and park on the left side of the road at the large turnout. Look for the green Seattle Department of Parks and Recreation 12-passenger van with the metal rack. An O<sub>2</sub> supervisor will meet you at the van at 10:00 am.

### **NUMBER OF YOUTH PARTICIPANTS:**

A Maximum of 8 per community center

### **SUPERVISION:**

O<sub>2</sub> will provide at least one O<sub>2</sub> staff and at least two additional volunteers, for a total

of three supervisors.

Each community center must provide at least one adult supervisor

**TRANSPORTATION:**

We are asking that each community center provide your own transportation in a department vehicle. Please do not transport yourselves or kids in non-city / approved vehicles.

**NECESSARY DEPARTMENT PAPERWORK:**

- Please refer to the Travel Planning Guideline website's Outdoor Rockclimbing logistics sheet for pertinent information on Emergency Response Plans, required paperwork, etc. The new Travel Planning Guidelines website can be found on the inweb at <http://inweb/parks/travel/>
- The O<sub>2</sub> program will complete an ERP for this trip prior to the summer. Feel free to make any necessary modifications to this ERP to reflect your center.

**THINGS FOR COMMUNITY CENTERS TO BRING:**

- Paperwork
- Food / Drink / LOTS OF water
- Warm / appropriate clothes - Please ask you youth participants to wear BAGGY shorts or pants. Tight pants have been known to tear during climbing activities.
- A community center adult supervisor

**PLEASE NOTE – THE OUTDOOR ROCK CLIMBING AREA AT EXIT 38 IS EXPOSED TO DIRECT SUN AND CAN GET VERY HOT. Food and LOTS OF WATER is an absolute necessity.**

**MEDICAL CONDITIONS:**

Please let Bob Warner or Matt Axling know before the trip if you have any youth participants that have special physical or behavior conditions. It is particularly important to let US know if any of your kids are taking prescription medication or have any allergies. This vital safety measure is essential to the well being of all the people involved.

**COMMITMENT AND FOLLOW THROUGH:**

A fair amount of logistical work has gone into the orchestration of this event. The O<sub>2</sub> program will definitely follow through and be there for your community center. We are asking that you confirm with Matt your attendance.

**SIGN UP PROCESS:**

Please e-mail Matt Axling at [matt.axling@seattle.gov](mailto:matt.axling@seattle.gov) to sign up for a rock climbing date. Please include your top three choices for climbing dates. If you have any questions, feel free to call at 390-1018.